OMB#: 2050-0028 Expires 06/30/2009

SEND COMPLETED FORM TO:	United States Environmental Pr	DINTED STATES					
The Appropriate State or EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM						
1. Reason for	Reason for Submittal:						
Submittal (See instructions on page 13.)	☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)						
on page toly	To provide Subsequent Notification of Regulated Waste Activity (to update site identification inform						
MARK ALL BOX(ES) THAT APPLY	☐ As a component of a First RCRA Hazardous Waste Part A Permit Application						
INALAFELI	□ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)						
	☐ As a component of the Hazardous Waste Report						
2. Site EPA ID	EDA ID Number						
Number (page 14)	II.A.D.1.0.0.10.12.12.12.1.6.15.13.1						
3. Site Name (page 14)	Name: Climax Molybdenum Company						
4. Site Location Information	Street Address: 2598 Highway 61						
(page 14)	Street Address: 2598 Highway 61  City, Town, or Village: Fort Madison			State: TA			
-	County Name: Lee			Zip Code: 52627			
5. Site Land Type (page 14)	Site Land Type:   ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other						
6. North American Industry Classification	A. 13131141191 B. 11111			_1			
System (NAICS) Code(s) for the Site (page 14)	c.   D.   IIII   D.   IIII   PESP REC						
(1-3)	APR 1 2 2007						
7. Site Mailing Address	Street or P. O. Box: P. O. Box 220						
(page 15)	City, Town, or Village: Fort Madison						
	State: Lowa						
	USA			52621			
8. Site Contact Person	First Name: Scott	MI: A	Last Name:	rkes			
(page 15)	Phone Number: Extension: 319 - 463 - 2224		Email address: Scott_Ickes@fmi.com				
9. Operator and Legal Owner	A. Name of Site's Operator: Climax Molybdenum Company		Date Became Operator (mm/dd/yyyy): 12/2/99				
of the Site	Operator Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other						
(pages 15 and 16)	B. Name of Site's Legal Owner: Date Became Owner (mm/dd/yyyy):						
	Freeport McMoRan Copper and G						
RCRAINFO data	Owner Type:   ☐ Private ☐ County ☐ District	☐ Federal	☐ Indian ☐ Municip	al ☐ State ☐ Other			
EPA Form 8700-12 (Revised 7/2006)  474888  Page 1 of 3							

RCRA RECORDS

EPA ID NO: I <u>I A</u>	D11010101121	2,2,16,15,3	J	OMB#: 2050-0028 Expires 06/30/2009			
9. Legal Owner	Street or P. O. Box: One North Central Ave.						
(Continued) Address	City, Town, or Village: Phoenix						
	State: Arizona	z					
	Country: USA			Zip Code: 85004			
10. Type of Regulated Mark "Yes" or "No		plete any additional l	ooxes as instruc	ted. (See instructions on pages 17 to 20.)			
A. Hazardous Wa Complete all pa	ste Activities arts for 1 through 6.						
Y⊠ N□ 1. Generator	of Hazardous Waste		Y□NĎ	🗘 2. Transporter of Hazardous Waste			
If "Yes", c	hoose only one of the f	ollowing - a, b, or c.	See Auto	A o Tueston Otenno en Diagona of			
□alQG	: Greater than 1,000 kg/r	mo (2.200 lbs /mo.)	Y⊓ NÀ	3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A			
	of non-acute hazardous waste; or			hazardous waste permit is required for this activity.			
☐ b. SQG	6: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.)			<u>.</u> .			
	of non-acute hazardou	s waste; or	Y□ NÛ	4. Recycler of Hazardous Waste (at your site)			
💢 c. CES	QG: Less than 100 kg/m			· .			
of non-acute hazardous waste			Y□NÜ	5. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.			
In addition, indicate other generator activities.			•	<ul> <li>a. Small Quantity On-site Burner</li> <li>Exemption</li> </ul>			
Y□ Nズ d. United States Importer of Hazardous Waste				■ b. Smelting, Melting, and Refining			
Y∐ N∭ e. Mixe	ed Waste (hazardous and	radioactive) Generate	or Y□NĎ	6. Underground Injection Control			
B. Universal Waste Activities			c.	C. Used Oil Activities			
Y⊟ NİXII 1. Larme Qua	ntity Handler of Univers	al Waste (accumula	te	Mark all boxes that apply.			
Y N № 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to			Y□ NÂ	র্ম্ব 1. Used Oil Transporter			
	what is regulated]. Ind	icate types of univer	sal	If "Yes", mark each that applies.			
mark all b	oxes that apply:	<u>Manage</u>		<ul><li>☐ a. Transporter</li><li>☐ b. Transfer Facility</li></ul>			
		<u>Manage</u>		b. Hander Lading			
a. Batteries			Y□ NĎ	☑ 2. Used Oil Processor and/or Re-refiner			
b. Pesticide	<b>S</b>			If "Yes", mark each that applies.   a. Processor			
c. Mercury o	ontaining equipment			b. Re-refiner			
d. Lamps	1			<b>-</b>			
e. Other (sp	ecify)		Y□ NĴ	☑ 3. Off-Specification Used Oil Burner			
f. Other (sp	ecify)	_ 🗆	Y□ NÇ	🛭 4. Used Oil Fuel Marketer			
g. Other (sp	ecify)	_ 🗖		If "Yes", mark each that applies.			
- · · · ·				☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to			
Y□ ND 2. Destination Facility for Universal Waste				Off-Specification Used Oil Burner  b. Marketer Who First Claims the			
Note: A hazardous waste permit may be required for this activity.			tivity.	Ligad Oil Mosts the Specifications			

Used Oil Meets the Specifications

EPA ID NO: 1_	<u>LIAIUII0I0</u>	101121212	11615151		OMB#: 2050-0028	Expires 06/30/2009
11. Description	of Hazardous Waste	s (See instruction	ns on page 21.)			
handled at	es for Federally Reg your site. List them in age if more spaces a	n the order they are				
D001	D006	D008	D009	F003	U228	
hazardous v	es for State-Regula wastes handled at yo s are needed for was	ur site. List them in				
3						
12. Comments (	See instructions on	page 21.)				
in accordance wit on my inquiry of the information submit penalties for subm	I certify under pena h a system designed he person or persons itted is, to the best of nitting false information transport waste Part of s on page 21.)	to assure that qual who manage the s my knowledge and on, including the po	ified personnel prop system, or those per I belief, true, accura sssibility of fine and i	perly gather and evants ons directly responder, and complete. I a simprisonment for known to the compression of the compression	luate the information nsible for gathering the am aware that there owing violations.	submitted. Based ne information, the are significant
Signature of operator, owner, or an authorized representative					Date Signed (mm/dd/yyyy)	
Jary M.	layew	GALY 61	(ASLOW)	EPERAtion	US MANAGER	4/09/07



Climax Molybdenum Company P.O. Box 220 Fort Madison, Iowa 52627 (319) 463-7151

April 9, 2007

07ENV-016

US EPA Region 7
Air, RCRA, and Toxics Division
RCRA Enforcement and State Programs Branch
ARTD/RESP
901 N. 5<sup>th</sup> Street
Kansas City, KS 66101

Subject: Climax Molybdenum Company EPA RCRA ID# IAD000222653 Change of Site's Legal Owner

Dear Sir/Madam,

I have enclosed an updated EPA Form 8700-12, which reflects the new site legal owner for our facility in Fort Madison, Iowa.

If you have any questions, please contact me at (319) 463-2224.

Sincerely,

Scott Ickes

Manager of QA and Environmental Affairs

Climax Molybdenum Co.

RESP RECEIVED